

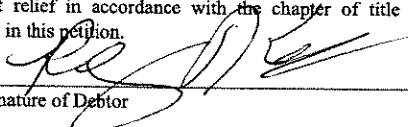
B1 (Official Form 1) (04/13)

UNITED STATES BANKRUPTCY COURT Northern District of Illinois		VOLUNTARY PETITION	
Name of Debtor (if individual, enter Last, First, Middle): <b>KELLOGG RICKY CARLTON JR</b>		Name of Joint Debtor (Spouse) (Last, First, Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):	
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): <b>7972</b>		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all):	
Street Address of Debtor (No. and Street, City, and State): <b>3535 171ST ST LANSING IL</b>		Street Address of Joint Debtor (No. and Street, City, and State):	
		ZIP CODE <b>60438</b>	
County of Residence or of the Principal Place of Business: <b>COOK</b>		County of Residence or of the Principal Place of Business:	
Mailing Address of Debtor (if different from street address):		Mailing Address of Joint Debtor (if different from street address):	
		ZIP CODE <b>60438</b>	
Location of Principal Assets of Business Debtor (if different from street address above):		ZIP CODE	
<b>Type of Debtor</b> (Form of Organization) (Check one box.)		<b>Nature of Business</b> (Check one box.)	
<input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		<input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	
<b>Chapter 15 Debtors</b> Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:		<b>Tax-Exempt Entity</b> (Check box, if applicable.)  <input type="checkbox"/> Debtor is a tax-exempt organization under title 26 of the United States Code (the Internal Revenue Code).	
		<b>Nature of Debts</b> (Check one box.)  <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.	
<b>Filing Fee</b> (Check one box.)		<b>Chapter 11 Debtors</b> <b>Check one box:</b> <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter).	
		<b>Check all applicable boxes:</b> <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).	
<b>Statistical/Administrative Information</b>			
<input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.			
<b>THIS SPACE IS FOR COURT USE ONLY</b>			
<b>JEFFREY R. ALLSTEADT, CLERK</b> <b>PS REP CM</b> <b>OCT 23 2015</b>			
<b>UNITED STATES BANKRUPTCY COURT</b> <b>NORTHERN DISTRICT OF ILLINOIS</b>			
<b>Estimated Number of Creditors</b> <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000			
<b>Estimated Assets</b> <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1 million to \$10 million <input type="checkbox"/> \$10 million to \$50 million <input type="checkbox"/> \$50 million to \$100 million <input type="checkbox"/> \$100 million to \$500 million <input type="checkbox"/> \$500 million to \$1 billion <input type="checkbox"/> \$1 billion to \$5 billion <input type="checkbox"/> More than \$5 billion			
<b>Estimated Liabilities</b> <input type="checkbox"/> \$0 to \$50,000 <input checked="" type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1 million to \$10 million <input type="checkbox"/> \$10 million to \$50 million <input type="checkbox"/> \$50 million to \$100 million <input type="checkbox"/> \$100 million to \$500 million <input type="checkbox"/> \$500 million to \$1 billion <input type="checkbox"/> \$1 billion to \$5 billion <input type="checkbox"/> More than \$5 billion			

B1 (Official Form 1) (04/13)

Page 2

<b>Voluntary Petition</b> (This page must be completed and filed in every case.)		Name of Debtor(s): <b>KELLOGG RICKY CARLTON JR</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet.)			
Location Where Filed:	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor</b> (If more than one, attach additional sheet.)			
Name of Debtor:	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
<b>Exhibit A</b> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)		<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts.)	
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).	
		<b>X</b> _____ Signature of Attorney for Debtor(s) (Date)	
<b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?			
<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
<b>Exhibit D</b> (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)			
<input type="checkbox"/> Exhibit D, completed and signed by the debtor, is attached and made a part of this petition.			
If this is a joint petition: <input type="checkbox"/> Exhibit D, also completed and signed by the joint debtor, is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box.)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes.)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)			
(Name of landlord that obtained judgment)			
(Address of landlord)			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): <b>KELLOGG RICKY CARLTON JR</b>
<b>Signatures</b>		
<b>Signature(s) of Debtor(s) (Individual/Joint)</b>		<b>Signature of a Foreign Representative</b>
<p>I declare under penalty of perjury that the information provided in this petition is true and correct.</p> <p>[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.</p> <p>[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p></p> <p><input checked="" type="checkbox"/> Signature of Debtor</p> <p><input checked="" type="checkbox"/> Signature of Joint Debtor <u>(703) 595-2635</u></p> <p>Telephone Number (if not represented by attorney) <u>10/23/15</u></p> <p>Date <u>10/23/15</u></p>		<p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p><input checked="" type="checkbox"/> (Signature of Foreign Representative)</p> <p>(Printed Name of Foreign Representative)</p> <p>Date</p>
<b>Signature of Attorney*</b>		<b>Signature of Non-Attorney Bankruptcy Petition Preparer</b>
<p><input checked="" type="checkbox"/> Signature of Attorney for Debtor(s)</p> <p>Printed Name of Attorney for Debtor(s)</p> <p>Firm Name</p> <p>Address</p> <p>Telephone Number</p> <p>Date</p>		<p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p>Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>Address</p> <p><input checked="" type="checkbox"/> Signature</p> <p>Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</i></p>
<p><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><input checked="" type="checkbox"/> Signature of Authorized Individual</p> <p>Printed Name of Authorized Individual</p> <p>Title of Authorized Individual</p> <p>Date <u>10/23/15</u> </p>		

B 1D (Official Form 1, Exhibit D) (12/09)

UNITED STATES BANKRUPTCY COURT  
Northern District of Illinois

In re KELLOGG RICKY CARLTON  
Debtor

Case No. \_\_\_\_\_  
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.]* *[Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

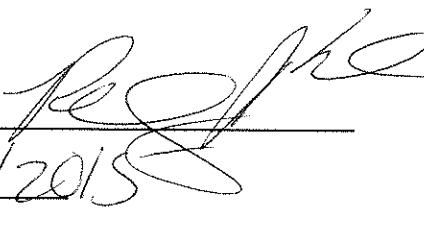
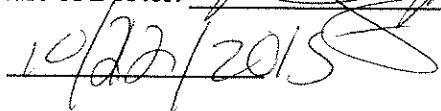
Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor:

Date:

B6 Summary (Official form 6 - Summary) (12/13)

# United States Bankruptcy Court

NORTHERN District Of ILLINOIS

In re KELLOGG RICKY CARLTON JR

Debtor

Case No. \_\_\_\_\_

Chapter 7 \_\_\_\_\_

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and related data" if they file a case under chapter 7,11,13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	No				
B - Personal Property	Yes	2	\$ 2,575.00		
C- Property Claimed as Exempt	Yes	1			
D- Creditors Holding Secured Claims	Yes	1		\$ 20,351.00	
E- Creditors Holding Unsecured Priority Claims	No				
F- Creditors Holding Unsecured Nonpriority Claims	Yes	1		\$ 58,860.00	
G- Executory Contracts and Unexpired Leases	No				
H - Codebtors	No				
I- Current Income of Individual Debtor(s)	Yes	2			\$ 1,856.56
J- Current Expenditures of Individual Debtor(s)	Yes	3			\$ 1,320.00
TOTAL		10	\$ 2,575.00	\$ 79,211.00	

B6 Summary (Official form 6 - Summary) (12/13)

# United States Bankruptcy Court

NORTHERN District Of ILLINOIS

In re KELLOGG RICKY CARLTON JR  
Debtor

Case No. \_\_\_\_\_

Chapter 7 \_\_\_\_\_

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)(whether disputed or undisputed)	
Student Loan Obligations (from Schedule F)	<b>\$ 57,572.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	
<b>TOTAL</b>	<b>\$ 57,572.00</b>

State the following:

Average Income (from Schedule I, Line 12)	<b>\$ 1,856.56</b>
Average Expenses (from Schedule J, Line 22)	
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20 )	<b>\$ 2,224.54</b>

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.		
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		
4. Total from Schedule F		<b>\$ 58,860.00</b>
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		<b>\$ 58,860.00</b>

B6B (Official Form 6B)  
(12/07)In re KELLOGG RICKY CARLTON JR  
Debtor

Case No. \_\_\_\_\_

(If Known)

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	<input type="checkbox"/>	75 DOLLARS		\$ 75.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	<input type="checkbox"/>	CHASE BANK CHECKING ACCOUNT 300		\$ 300.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	<input checked="" type="checkbox"/>			
4. Household goods and furnishings, including audio, video, and computer equipment.	<input type="checkbox"/>	40 IN TV, BED 3535 171ST ST LANSING IL 60438		\$ 700.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.	<input checked="" type="checkbox"/>			
6. Wearing apparel.	<input type="checkbox"/>	EVERY DAY CLOTHING		\$ 1,500.00
7. Furs and jewelry.	<input checked="" type="checkbox"/>			
8. Firearms and sports, photographic, and other hobby equipment.	<input checked="" type="checkbox"/>			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	<input checked="" type="checkbox"/>			
10. Annuities. Itemize and name each issuer.	<input checked="" type="checkbox"/>			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)).	<input checked="" type="checkbox"/>			

B6B (Official Form 6B) (12/07) -- Cont.

In re KELLOGG RICKY CARLTON JR

Debtor

Case No. \_\_\_\_\_

(If Known)

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
22. Patents, copyrights, and other intellectual property. Give particulars.	<input type="checkbox"/>			
23. Licenses, franchises, and other general intangibles. Give Particulars.	<input type="checkbox"/>			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	<input type="checkbox"/>			
25. Automobiles, trucks, trailers, and other vehicles and accessories.	<input type="checkbox"/>			
26. Boats, motors, and accessories.	<input type="checkbox"/>			
27. Aircraft and accessories.	<input type="checkbox"/>			
28. Office equipment, furnishings, and supplies.	<input type="checkbox"/>			
29. Machinery, fixtures, equipment, and supplies used in business.	<input type="checkbox"/>			
30. Inventory.	<input type="checkbox"/>			
31. Animals.	<input type="checkbox"/>			
32. Crops - growing or harvested. Give Particulars	<input type="checkbox"/>			
33. Farming equipment and implements.	<input type="checkbox"/>			
34. Farm supplies, chemicals, and feed.	<input type="checkbox"/>			
35. Other personal property of any kind not already listed. Itemize.	<input type="checkbox"/>			

\_\_\_\_\_ continuation sheets attached

**Total ▷ \$ 2,575.00**

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

B6C Official Form 6C

In re KELLOGG RICKY CARLTON JR,  
Debtor

Case No. \_\_\_\_\_  
(If Known) \_\_\_\_\_

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:  
(Check One Box)

11 U.S.C. § 522(b)(2)  
 11 U.S.C. § 522(b)(3)

Check if debtor claims a homestead exemption that exceeds  
\$155,675 \*

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
HOUSEHOLD GOODS BED VALUED AT (\$350) 40IN TV (300)	735 ILCS 5/12-1001(b)	\$ 700.00	\$ 700.00
CLOTHING VALUED AT USED CLOTHING STORE PRICES	735 ILCS 5/12-1001(a)	\$ 1,500.00	\$ 1,500.00
CHASE BANK CHECKING	735 ILCS 5/12-1001(b)	\$ 300.00	\$ 300.00

\* Amount subject to adjustment on 4/1/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re

Debtor

Case No.

(If Known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 78928891			AUTO 10/31/2014	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ 6,715.00	
CREDIT ACCEPTANCE CORPORATION 25505 W 12 Mile Rd Southfield, MI-480341846	<input type="checkbox"/>		VALUE \$ 6,715.00					
ACCOUNT NO. 6026211574746100			10/07/2011 09/30/2015 REPO	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 9,027.00	\$ 9,027.00
Capital One Auto Finance ATTN: Bankruptcy Dept 3901 Dallas Pkwy Plano, TX-75093	<input type="checkbox"/>		VALUE \$ 9,027.00					
ACCOUNT NO. 53367			11/24/2006	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ 4,609.00	\$ 4,609.00
CONDOR CAPITAL ATTN: BICKA CUBICION 18 165 OSER AVE HAUPPAUGE NY 11788	<input type="checkbox"/>		VALUE					
ACCOUNT NO.			Subtotal Total of this page				\$ 20,351.00	\$ 13,636.00
			Total Use only on last page				\$ 20,351.00	\$ 13,636.00

continuation sheets attached

(Report total also on  
Summary of Schedules)

(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
data)

B 6F (Official Form 6F) (12/07)

In re

Debtor

Case No.

(If Known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community maybe liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data..

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
				CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. 4691798581	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$ 23,346.00
US DEPT OF EDU/ Gleisi ATTN: Bankruptcy Dept Po Box 7860 Madison WI 53707	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$ 23,346.00
			VALUE \$ 23,346.00			
ACCOUNT NO. 9545904459010011	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$ 34,226.00
NAVIENT ATTN: Bankruptcy Dept Po Box 9500, Wilkes Barre PA 18773	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$ 34,226.00
			VALUE \$ 35,514.00			
ACCOUNT NO.			2015	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$ 845.00
VISION FINANCIAL SERVICES ATTN: Bankruptcy Dept Po Box 1900 W Server Rd La Porte IN 46350	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$ 845.00
			VALUE \$ 845.00			
ACCOUNT NO. NULL	<input type="checkbox"/>		CREDIT CARD 03/30/2012	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$ 443.00
FIRST PREMIER BANK ATTN: Bankruptcy Dept 601 S Minnesota Ave Sioux Falls SD 57104	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$ 443.00
			VALUE \$ 443.00			
Subtotal				\$ 58,860.00		
(Use only on last page of the completed Schedule F.) Total (Report total also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

continuation sheets  
attached

Subtotal ► \$ 58,860.00

(Use only on last page of the completed Schedule F.) Total  
(Report total also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

**Fill in this information to identify your case:**

Debtor 1	RICKY First Name	CARLTON Middle Name	KELLOGG JR Last Name
Debtor 2 (Spouse if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the _____		District of _____	
Case Number (If Known) _____			

Check if this is an amended filing  
 A supplement showing post-petition chapter 13 income as of the following date:

MM/DD/YYYY

**Official Form B 6I**

**Schedule I: Your Income**

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment**

**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self employed work.

Occupation may be student or homemaker, if it applies

**Employment Status**

**Debtor 1**

Employed  
 Not Employed

**Debtor 2 or non filing spouse**

Employed  
 Not Employed

**Occupation**

RETAILSALES

**Employers Name**

SHOE CARNIVAL

**Employers Address**

7500 E COLUMBIA ST

Number Street

Number Street

EVANSVILL IN 47715

City State Zip

City State Zip

**How long employed there**

1 YEAR

**Part 2:**

**Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions) If not paid monthly, calculate what your monthly wage would be.
3. Estimate and list monthly overtime pay.
4. Calculate gross income. Add line 2 + line 3

**For Debtor 1**

2. \$ 2,554.54

**For Debtor 2 or non filing spouse**

\$

3. \$ 129.49

\$

4. \$ 2,684.03

\$ 0.00

Debtor 1 RICKY CARLTON KELLOGG JR

First Name Middle Name Last Name

Case Number (if known) \_\_\_\_\_

For Debtor 1

For Debtor 2 or non-filing spouse

Copy line 4 here..... →

4. \$ 2,554.54

\$ \_\_\_\_\_

5. List all payroll deductions:

5a. Tax, Medicare, and Social Security Deductions

5a. \$ 581.66

\$ \_\_\_\_\_

5b. Mandatory contributions for retirement plans

5b. \$ \_\_\_\_\_

\$ \_\_\_\_\_

5c. Voluntary contributions for retirement plans

5c. \$ \_\_\_\_\_

\$ \_\_\_\_\_

5d. Required repayments of retirement fund loans

5d. \$ \_\_\_\_\_

\$ \_\_\_\_\_

5e. Insurance

5e. \$ 116.32

\$ \_\_\_\_\_

5f. Domestic support obligations

5f. \$ \_\_\_\_\_

\$ \_\_\_\_\_

5g. Union dues

5g. \$ \_\_\_\_\_

\$ \_\_\_\_\_

5h. Other deductions Specify: \_\_\_\_\_

5h. \$ \_\_\_\_\_

\$ \_\_\_\_\_

6. Add the payroll deductions. 5a+5b+5c+5d+5e+5f+5g+5h

6. \$ 697.98

\$ 0.00

7. Calculate total monthly take-home pay: Subtract line 6 from line 4

7. \$ 1,856.56

\$ 0.00

8. List all other income regularly received:

8a. Net income from rental property and from operating a business, profession, or farm

8a. \$ \_\_\_\_\_

\$ \_\_\_\_\_

Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.

8b. Interest and dividends

8b. \$ \_\_\_\_\_

\$ \_\_\_\_\_

8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive

Include alimony, spousal support, child support, maintenance, divorce settlement and property settlement.

8c. \$ \_\_\_\_\_

\$ \_\_\_\_\_

8d. Unemployment compensation

8d. \$ \_\_\_\_\_

\$ \_\_\_\_\_

8e. Social Security

8e. \$ \_\_\_\_\_

\$ \_\_\_\_\_

8f. Other government assistance that you regularly receive

Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplimental Nutrition Assistance Program) or housing subsidies. Specify: \_\_\_\_\_

8f. \$ \_\_\_\_\_

\$ \_\_\_\_\_

8g. Pension or retirement income

8g. \$ \_\_\_\_\_

\$ \_\_\_\_\_

8h. Other monthly income . Specify: \_\_\_\_\_

8h. \$ \_\_\_\_\_

\$ \_\_\_\_\_

9. Add all other income: 8a+8b+8c+8d+8e+8f+8g+8h

9. \$ 0.00

\$ 0.00

10. Calculate monthly income. Add line 7 + line 9

Add the entries in line 10 for debtor 1 and debtor 2 or non-filing spouse.

10. \$ 1,856.56

\$ 0.00

= \$ 1,856.56

11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: \_\_\_\_\_

11. \$ \_\_\_\_\_

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies

12. \$ 1,856.56

Combined Monthly Income

13. Do you expect an increase or decrease within the year after you file this forms

No.

Yes. Explain \_\_\_\_\_

**Fill in this information to identify your case:**

Debtor 1	RICKY First Name	CARLTON Middle Name	KELLOGG JR Last Name
Debtor 2 (Spouse if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the _____		District of _____	
Case Number _____ (If Known)			

Check if this is:

An ammended filing  
 A supplement showing post-petition chapter 13 expenses as of the following date:  
  
MM/DD/YYYY  
 A separate filing for debtor 2 because debtor 2 maintains a seperate household

**Official Form B 6J**

**Schedule J: Your Expenses**

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household**

1. Is this a joint case?

No. Go to line 2  
 Yes. Does Debtor 2 live in a separate household  
     No  
     Yes. Debtor 2 must file a separate Schedule J

2. Do you have dependents?

Do not list Debtor 1  
and Debtor 2

No

Yes. Fill out this information for  
each dependent

Dependent's relationship to  
Debtor 1 or Debtor 2

Dependent's  
age

Does dependent live  
with you?

No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes

3. Do your expenses include expenses of  
people other than yourself and your  
dependents?

No  
 Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a suppliment in a chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplimental Schedule J, check the box at the top of the form and fill in the applicable data.

Include expenses paid for with non-cash government assistance if you know the value  
of such assistance and have included it on Schedule I: Your Income (Official Form B6I)



4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 520.00

If not included in line 4:

4a. Real estate taxes  
4b. Property, homeowner's or renter's insurance  
4c. Home maintenance, repair, and upkeep expenses  
4d. Homeowners association or condominium dues

4a. \$ \_\_\_\_\_  
4b. \$ \_\_\_\_\_  
4c. \$ \_\_\_\_\_  
4d. \$ \_\_\_\_\_

Debtor 1

RICK

CARTON

Middle Name

kellogg

Last Name

Case Number  
(If Known) Your Expenses

5. Additional mortgage payments for your residence, such as home equity loans	5. \$ _____
6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ 70.00
6b. Water, sewer, garbage collection	6b. \$ _____
6c. Telephone, cell phone, internet, satellite, and cable service	6c. \$ 125.00
6d. Other: Specify _____	6d. \$ _____
7. Food and housekeeping supplies	7. \$ 230.00
8. Childcare and children's education costs	8. \$ _____
9. Clothing, laundry, and dry cleaning	9. \$ 125.00
10. Personal care products and services	10. \$ 50.00
11. Medical and dental expenses	11. \$ _____
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments	12. \$ 200.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ _____
14. Charitable contributions and religious donations	14. \$ _____
15. Insurance: Do not include insurance deducted from your pay or included in lines 4 or 20	
15a. Life insurance	15a. \$ _____
15b. Health insurance	15b. \$ _____
15c. Vehicle insurance	15c. \$ _____
15d. Other: Specify 1 _____	15d. \$ _____
16. Taxes: Do not include taxes deducted from your pay or included in line 4 or 20	
Specify 1 _____	16. \$ _____
17. Installment or lease payments:	
17a. Car payment for vehicle 1	17a. \$ _____
17b. Car payment for vehicle 2	17b. \$ _____
17c. Other: Specify 1 _____	17c. \$ _____
17d. Other: Specify 1 _____	17d. \$ _____
18. Your payments of alimony, maintenance, and support you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B6I)	18. \$ _____
19. Other payments you make to support others who do not live with you	
Specify 1 _____	19. \$ _____
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I, Your Income	
20a. Mortgages on the property	20a. \$ _____
20b. Real estate taxes	20b. \$ _____
20c. Property, homeowners, or renter's insurance	20c. \$ _____
20d. Maintenance, repair, and upkeep expenses	20d. \$ _____
20e. Maintenance, repair, and upkeep expenses	20e. \$ _____

Debtor 1 RICKY CARLTON KELLOGG Case Number \_\_\_\_\_  
 First Name Middle Name Last Name (If Known)

21. Other: Specify \_\_\_\_\_ 21. + \$ \_\_\_\_\_

22. Your monthly expenses. Add lines 4 through 21  
 The result is your monthly expenses 22. \$ 1,320.00

23. Calculate your monthly net income

23a. Copy line 12 (your combined monthly income) from schedule I 23a. \$ 1,856.00

23b. Copy your monthly expenses from line 22 above 23b. \$ 1,120.00

23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. \$ 736.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payments to increase or decrease because of a modification to the terms of your mortgage?

No Explain here:  
 Yes

B 8 (Official Form 8) (12/08)

UNITED STATES BANKRUPTCY COURT  
Northern District of Illinois

In re KELLOGG RICKY CARLTON,  
Debtor

Case No. \_\_\_\_\_  
Chapter 7

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

**PART A – Debts secured by property of the estate.** (*Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.*)

Property No. 1	
<b>Creditor's Name:</b> CREDIT ACCEPTANCE CORPORATION	<b>Describe Property Securing Debt:</b> CAR

Property will be (*check one*):

Surrendered  Retained

If retaining the property, I intend to (*check at least one*):

Redeem the property  
 Reaffirm the debt  
 Other. Explain MAKE PAYMENTS AS NORMAL (for example, avoid lien using 11 U.S.C. § 522(f)).

Property is (*check one*):

Claimed as exempt  Not claimed as exempt

Property No. 2 ( <i>if necessary</i> )	
<b>Creditor's Name:</b>	<b>Describe Property Securing Debt:</b>

Property will be (*check one*):

Surrendered  Retained

If retaining the property, I intend to (*check at least one*):

Redeem the property  
 Reaffirm the debt  
 Other. Explain \_\_\_\_\_ (for example, avoid lien using 11 U.S.C. § 522(f)).

Property is (*check one*):

Claimed as exempt  Not claimed as exempt

## CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

*(Continuation Sheet)*

### PART A - Continuation

Property No.	
Creditor's Name:	Describe Property Securing Debt:
Property will be <i>(check one)</i> : <input type="checkbox"/> Surrendered <input type="checkbox"/> Retained	
If retaining the property, I intend to <i>(check at least one)</i> : <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is <i>(check one)</i> : <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

### PART B - Continuation

Property No.		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO
Property No.		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

**PART B – Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)**

Property No. 1		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 2 (if necessary)		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 3 (if necessary)		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

\_\_\_\_\_ continuation sheets attached (if any)

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date: 10/22/2015

  
Signature of Debtor

\_\_\_\_\_  
Signature of Joint Debtor

UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION

In Re: KELLOGG RICKY CARLTON JR )  
 )  
 )  
 ) Case No.  
Debtor (s) )  
 ) Chapter  
 )  
 )

List of Creditors

Capital One Auto Finance ATTN: Bankruptcy Dept 3901 Dallas Pkwy Plano, TX-75093	CONDOR CAPITAL CORP ATTN: Bankruptcy Dept 165 OSER AVE HAUPPAOGE NY 11788
FIRST PREMIER BANK ATTN: Bankruptcy Dept 601 S Minnesota Ave Sioux Falls SD 57104	INGALLS MEMORIAL HOSPITAL 1 Ingalls Dr Harvey, IL 60426
NAVIENT ATTN: Bankruptcy Dept Po Box 9500, Wilkes Barre PA 18773	Cavalry Portfolio Services ATTN: Bankruptcy Dept 500 Summit Lake Drive, Suite 400 Valhalla, NY 10595
US DEPT OF EDU/ Gleisi ATTN: Bankruptcy Dept Po Box 7860 Madison WI 53707	CREDIT ACCEPTANCE CORPORATION 25505 W 12 Mile Rd Southfield, MI-480341846
VISION FINANCIAL SERVICES ATTN: Bankruptcy Dept Po Box 1900 W Server Rd La Porte IN 46350	

UNITED STATES BANKRUPTCY COURT

**Northern District of Illinois**

In re KELLOGG RICKY CARLTON JR  
Debtor

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)  
UNDER § 342(b) OF THE BANKRUPTCY CODE**

**Certification of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code.

Printed name and title, if any, of Bankruptcy Petition Preparer  
Address:

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

**Certification of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Ricky Kellogg  
Printed Name(s) of Debtor(s)

X  10/20/15  
Signature of Debtor Date

Case No. (if known)

X \_\_\_\_\_  
Signature of Joint Debtor (if any) Date \_\_\_\_\_

**Instructions:** Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.